Operations Memorandum – Medicaid OPS031010

Attachment

DATE: 10/28/03

SUBJECT: Medical Assistance for Workers with Disabilities

(MAWD) and Waivers

TO: Executive Directors

FROM: Christine M. Bowser, Director, Bureau of Operations

Purpose

- 1. To inform County Assistance Offices (CAOs) that, effective immediately, individuals enrolled in MAWD can apply for waiver services, and those in waiver programs can apply for MAWD. In addition, individuals not enrolled in either MAWD or a waiver can apply for both.
- 2. To provide the CAOs with instructions for determining eligibility for combined MAWD/Waiver eligibility.

Background

Operations Memorandum #02-01-01 states that MAWD applicants/recipients are not automatically eligible for waivers. In addition, the Operations Memorandum states that individuals cannot be eligible for MAWD and waivers at the same time. According to the directions in Operations Memorandum #02-01-01, MAWD recipients who become eligible for waiver services would be closed in the MAWD budget and opened in the appropriate waiver.

Effective with this Operations Memorandum, individuals enrolled in MAWD can participate in waiver programs, if clinically eligible. In addition, individuals enrolled in waiver programs can now enroll in MAWD, if eligible.

PLEASE NOTE THAT THIS OPERATIONS MEMORANDUM APPLIES TO ALL WAIVERS FOR WHICH MAWD RECIPIENTS CAN QUALIFY. CURRENTLY, THE ONLY EXCEPTION IS THE INFANTS, TODDLERS, AND FAMILIES WAIVER (AS MAWD RECIPIENTS CANNOT QUALIFY FOR THAT WAIVER).

Discussion

Individuals enrolled in MAWD must be informed that they may apply for waiver services. They must also be informed of the advantages and disadvantages of enrolling in MAWD, a waiver, or both. To be eligible for waiver services, these individuals must meet the clinical (level of care) eligibility requirements for the waiver. In addition, individuals age 55 and older who receive waiver services are subject to Medicaid Estate Recovery requirements. The benefit of waiver services to MAWD enrollees is access to home and community-based services (HCBS). HCBS is a set of medical and nonmedical services (such as attendant care and case management) designed to help persons with disabilities and older Pennsylvanians live independently in their homes and communities.

Because MAWD has higher income and resource limits than other Medicaid eligibility groups, individuals enrolled in a waiver have the opportunity to earn more income and save more with MAWD and still maintain their waiver services. Individuals enrolled in waivers who apply for MAWD need to be informed about the implications of choosing MAWD instead of Medicaid coverage under a more traditional health care group. To be eligible for MAWD, these individuals must meet MAWD age and disability requirements, and must also be employed. In addition, these individuals will be required to pay a premium to receive MAWD benefits.

Not all individuals participating in waivers are enrolled in managed care. Currently, individuals found eligible for the Pennsylvania Department of Aging Waiver or Elwyn Waiver are not enrolled in managed care. Because of this, the current rules governing managed care will still apply regardless of MAWD or waiver eligibility.

There are procedures that need to be followed to ensure that waiver services are made available to individuals eligible for MAWD, and that MAWD is made available to individuals in waiver programs, if all applicable eligibility requirements are met. The attached MAWD/Waiver Informational Chart details differences between the eligibility criteria for HCBS waivers and MAWD (including an explanation of the premium payment). The MAWD/Waiver Informational Chart will be given to the Program Offices handling the appropriate waiver program and to CAO staff.

Evaluate the eligibility for individuals found clinically eligible for a waiver for all other Medicaid categories before evaluating for MAWD. Use the PA 600L for waivers. Individuals participating in waivers do not need to complete a PA 600WD to apply for MAWD. A supplemental page with information about the MAWD premium will be attached to the PA600L. A supplemental page will be attached to the PA 600WD to incorporate waiver eligibility requirements.

When considering resource and income limits for combined MAWD and Waiver eligibility, use the MAWD resource and income limits to determine eligibility.

When determining combined MAWD and Waiver eligibility, the following requirements and procedures should be followed:

1. FINANCIAL ELIGIBILITY

Individuals must meet certain age, disability, and employment requirements to be eligible for both MAWD and waivers.

• Age - Individuals must meet both the MAWD age requirement (age 16 to 64) and the age limit for the appropriate waiver.

Example: The Consolidated Waiver for Individuals with Mental Retardation is for individuals age three and older, but only individuals age 16 and older would be eligible for both MAWD and the Consolidated Waiver.

- Disability Individuals must meet the disability criteria for MAWD AND be determined clinically eligible for the appropriate waiver.
- Employment MAWD applicants/recipients must be employed.

• Premium - MAWD-eligible individuals must pay a monthly premium to maintain MAWD eligibility. A monthly premium of less than \$10 is waived.

NOTE: The Consolidated Waiver for Individuals with Mental Individuals participating in a waiver who apply for MAWD must be made aware of the premium requirement.

2. RESOURCE ELIGIBILITY

Waiver participants enrolled in MAWD have a higher resource limit than waiver participants enrolled in other Medicaid groups. Individuals participating in waiver programs should be made aware of this when applying for or deciding to apply for MAWD.

- Resource Limits Use the MAWD resource eligibility limit of \$10,000.
- Look-Back Look-Back requirements DO NOT apply for MAWD.

NOTE: The countable resources of the individual's spouse are also included in determining resource eligibility.

3. INCOME ELIGIBILITY

Waiver recipients enrolled in MAWD benefit from higher income limits than waiver recipients in other Medicaid groups. Waiver enrollees applying for MAWD should be informed of these different limits by the program office or the CAO.

- Income Use the MAWD income eligibility guideline of 250 percent of the Federal Poverty Income Guidelines.
- Spousal Income Spousal income is counted under MAWD. Please refer to Medical Assistance Eligibility Handbook Chapter 316 for MAWD income methodology and requirements. If the individual is eligible for the waiver under the Special Income Limit (300 percent of the Federal Benefit Rate), DO NOT count the spouse's income.

4. MEDICAID ESTATE RECOVERY REQUIREMENTS

- Individuals 55 years of age and older are subject to the Medicaid estate recovery requirements for the following types of services received:
 - Nursing Facility Care;
 - Home and Community-Based Services; and
 - Any related hospital care and prescription drug services provided while receiving nursing facility care or care at home or in a community setting.

5. CASE MAINTENANCE

Individuals eligible for both MAWD and waivers follow MAWD requirements for the following:

- Eligibility Period A calendar month is used as the basis when determining the MAWD eligibility period. MAWD benefits are opened at the beginning of the month and are closed at the end of the month. Do not use the cash payment schedule that is currently used for waivers.
- Redetermination Redeterminations are required every 12 months. Use the PA 600WD for the yearly redetermination for MAWD and waiver services.
 MAWD redeterminations do not need to include a redetermination of clinical level-of-care eligibility as long as a current waiver eligibility determination has been provided by the Program Offices, such as the MR 250 or 251 for individuals in the Consolidated or Person/Family Directed Support waivers.
- MAWD or Waiver Closure When an individual's eligibility for MAWD or a waiver ends (either by individual choice or by eligibility requirements), review the case for continued Medicaid eligibility under other categories.

6. CIS

- MAWD and waiver applications can be processed in CIS using the current PW
 and PI categories with the entry of the facility code on CAIFAC identifying the
 individual's appropriate waiver eligibility. New MAWD and waiver categories,
 PWW and PIW, will be implemented at a future date to allow for identification
 of MAWD and waiver applications.
- Medicaid Benefits Health Care Benefit Packages 1, 2, and 8 apply. Waiver services for the appropriate waiver will be based on the entry of the facility code.

7. REFERRAL PROCEDURES

Program Offices will be responsible for developing procedures within their waiver programs to correspond with this Operations Memorandum. Any current waiver recipient who expects to be employed (as defined in the MAWD State Plan) should be advised about MAWD. Program Offices have the responsibility to inform current waiver recipients about MAWD and to refer individuals to the CAO when the waiver recipient or his representative chooses to have a MAWD determination made by the CAO. Program Offices will also be receiving a copy of this Operations Memorandum along with additional instructions regarding waiver system adjustments that need to be made to accommodate MAWD eligibility. Program offices will also have MAWD outreach information provided through the Department of Public Welfare for dissemination to individuals, families, and advocates.

The Benefits Planning Outreach and Assistance Office (BPAO) funded by the SSA is another available resource to individuals interested in applying for MAWD. The BPAO provides technical assistance to individuals with disabilities receiving SSI and SSDI who need assistance in maintaining their Social Security benefits during employment.

For individuals already enrolled in MAWD or participating in a waiver, the information necessary to determine eligibility should be referred to the appropriate office (either the CAO or the appropriate Waiver Program Office) for those who

apply. Individuals who are already enrolled in MAWD must complete the Supplement to the PA 600WD to apply for waiver services. Individuals who are already participating in a waiver must complete the Supplement to the PA 600L to apply for MAWD. Both supplements are attached to this Operations Memorandum.

In addition to applications received at the CAO, Waiver Program Offices will make MAWD/Waiver referrals, and MAWD/Waiver applications will be generated by COMPASS. Follow the appropriate procedure when handling MAWD/Waiver applications and referrals:

• INDIVIDUALS ENROLLED IN MAWD WHO ARE APPLYING FOR WAIVERS

- A. When the individual applies for waiver services at the CAO, process as follows:
 - 1. Refer the individual to the appropriate CAO staff to explain the differences between MAWD requirements and waiver requirements and to review the informational page.
 - 2. The appropriate CAO staff will refer the individual to the appropriate Waiver Program Office.
 - 3. The Waiver Program Office will determine clinical eligibility and notify the appropriate CAO staff of the decision on clinical eligibility.
 - 4. After clinical eligibility has been determined, appropriate CAO staff will enter the appropriate facility code.
 - 5. Update the case narrative to reflect combined MAWD/Waiver eligibility.
 - 6. Send waiver eligibility notices to the individual and appropriate waiver provider agency(ies).
- B. When the individual applies via COMPASS, process as follows:
 - * Note that two waivers are available via COMPASS: The Consolidated Waiver for Individuals with Mental Retardation and The Person/Family Directed Support Waiver.
 - 1. the application to the appropriate CAO staff responsible for waivers to make sure that the Waiver Program Office has received the information from the Health Care Services Information System.
 - 2. Appropriate CAO staff will contact the individual to explain the differences between MAWD requirements and waiver requirements and to review the informational page.

- 3. The Waiver Program Office will make the clinical determination and inform the appropriate CAO staff. After clinical eligibility has been determined, refer the individual to the appropriate CAO staff.
- 4. Enter the appropriate facility code.
- 5. Update the case narrative to reflect combined MAWD/Waiver eligibility.
- 6. Send waiver eligibility notices to the individual and appropriate waiver provider agency(ies).
- C. When the individual applies at the Waiver Program Office, process as follows:
 - 1. The Waiver Program Office will contact the appropriate CAO staff. The Waiver Program Office will also make the clinical determination.
 - 2. The appropriate CAO staff will contact the individual to explain the differences between MAWD requirements and waiver requirements and to review the informational page.
 - 3. After the clinical determination has been made, the Waiver Program Office will inform the appropriate CAO staff of the decision on clinical eligibility. After clinical eligibility has been determined, the appropriate CAO staff will enter the appropriate facility code.
 - 4. Update the case narrative to reflect combined MAWD/Waiver eligibility.
 - 5. Send waiver eligibility notices to the individual and appropriate waiver provider agency(ies).
- INDIVIDUALS PARTICIPATING IN A WAIVER WHO ARE APPLYING FOR MAWD

Use the same procedure for all three instances (CAO application, COMPASS application, Waiver Program Office Application).

- * Note that when an application is made at the Waiver Program Office, the Waiver Program Office Staff will contact the appropriate CAO staff.
 - 1. the individual to the appropriate CAO staff.
 - 2. Follow existing CAO waiver procedures so that the program office is notified of the MAWD application.

- 3. Contact the individual to explain the differences between MAWD requirements and waiver requirements and review the informational page. Explain the MAWD premium requirement.
- 4. Review Medicaid eligibility to determine if the individual remains eligible for the current category or for another Medicaid category. If the individual is only eligible for the waiver under MAWD, proceed to step 5.
- 5. Review that the appropriate facility code is on CIS.
- 6. Update the narrative in the case record to reflect combined MAWD/Waiver eligibility.
- 7. Send Medicaid eligibility notices to the individual and appropriate waiver provider agency(ies).
- 8. Send waiver eligibility notices to the individual and appropriate waiver provider agency(ies).

NEW APPLICATIONS

Use the same procedure for all three instances (CAO application, COMPASS application, Waiver Program Office Application).

- 1. the application to the appropriate CAO staff to determine Medicaid eligibility. If eligible, open the appropriate Medicaid category.
- 2. Follow existing CAO waiver procedures so that the program office is notified of the application. If the individual has been opened in MAWD, proceed to step 3. Otherwise, follow existing waiver procedures.
- 3. Review the informational page with the applicant and explain the differences between MAWD requirements and waiver requirements. Explain the MAWD premium requirement.
- 4. The Waiver Program Office will make the clinical determination and inform CAO staff responsible for waivers. After clinical eligibility has been determined, refer the case to the appropriate CAO staff.
- 5. Enter the appropriate facility code.
- 6. Update the narrative in the case record to reflect combined MAWD/Waiver eligibility.
- 7. Send Medicaid eligibility notices to the individual and appropriate waiver provider agency(ies).
- 8. Send waiver eligibility notices to the individual and appropriate waiver provider agency(ies).

Next Steps

- 1. Review this Operations Memorandum with appropriate staff and program office representatives so that coordinated internal and external procedures can be developed.
- 2. Review the attached MAWD/Waiver Informational Chart and supplemental pages to the PA 600L and PA 600WD.
- 3. For individuals currently enrolled in MAWD or a waiver, review for combined MAWD and Waiver eligibility at next client contact.
- 4. Begin accepting applications, effective immediately.
- 5. Information on CIS data entry will be provided in a Daily Status.
- 6. Contact your Area Manager if you have any questions.
- 7. This Operations Memorandum becomes obsolete upon receipt of Medicaid Eligibility Handbook changes.

Attachments

Last modified: Tuesday, October 28, 2003